#### DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

# **Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS AS (SEMIAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

#### **Facility Information**

Facility Name: BELL THERAPY BLUEMOUND (310038)

Address: 101 N 75TH ST, MILWAUKEE, WI 53213

**License Status: REGULAR** 

Licensed/Certified/Registered 10/01/1990

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey	History
Suite	IIIGUUI Y

Survey ID: 0091318 End Date: 10/21/2003 Type: OTHER Purpose: VERIFICATION VISIT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0090510 End Date: 06/11/2003 Type: STANDARD Purpose: SURVEY

**Results:** ENFORCEMENT ACTION

Statement of Deficiency: #10006793 Served 06/24/2003

		<u>Compliance</u>	
Deficiencies Cited	Subject Area	<u>Verified</u>	Corrected
83.14(1)(c)	UNIVERSAL PRECAUTIONS	10/21/2003	Yes
83.35(5)(c)	FROZEN AT 0 DEGREES F. OR BELOW	10/21/2003	Yes
83.42(2)(a)	EVALUATION RESIDENT EVACUATION LIMITS	10/21/2003	Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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### **Enforcement History**

Date: 06/20/2003 SOD #10006793 Appealed: No

**Sanctions** 

FORFEITURE---83.14(1)(c)

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